

**SUMMARY OF CAMPAIGN CONTRIBUTIONS AND EXPENSES**  
**2000 PRIMARY AND GENERAL ELECTIONS**

*State of Nevada*

SYD BROSTEN TRUSTEE 1861D  
Candidate's Name(print) Office District (if applicable)  
P.O. Box 5866 INCLINE VILLAGE NV, 89450 775-831-4111  
Mailing address (include city and zip code) Telephone Number

**REPORT NUMBER 1 - DUE AUGUST 29, 2000**

Report Period **Began:** December 17, 1994, for an office with a six year term  
Report Period **Began:** December 21, 1996, for an office with a four year term  
Report Period **Began:** December 19, 1998, for an office with a two year term

Report Period **Ends:** August 23, 2000

**Cash on hand from previous campaign** (should equal the balance shown on your last disposition of unspent contributions report), if any \_\_\_\_\_

**CONTRIBUTIONS SUMMARY**

1. Total Amount of contributions in excess of \$100	<u>750.00</u>
2. Total amount of contributions of \$100 or less	<u>300.00</u>
Actual number of contributions of \$100 or less <u>3</u>	
3. Interest and income earned, if any	<u>0</u>
4. <b>TOTAL AMOUNT OF ALL CONTRIBUTIONS</b> (add lines 1 through 3)	<u>\$ 1,050.00</u>

**EXPENSES SUMMARY**

5. Total amount of expenses in excess of \$100	<u>699.30</u>
6. Total amount of expenses of \$100 or less	<u>0</u>
7. Expense for filing fee	<u>30.00</u>
8. <b>TOTAL AMOUNT OF ALL EXPENSES</b> (add lines 5 through 7)	<u>729.30</u>

**If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer.**

I declare under penalty of perjury that the foregoing is true and correct.

Executed on AUG 25, 2000  
Date

Syd A. Brosten  
Signature of Candidate

SYD BROSTEN INGID TRUSTEE  
 Candidate's Name (print) Office District (if applicable)

**Contributions in Excess of \$100 or, When Added Together Exceed of \$100**

CONTRIBUTOR'S NAME AND ADDRESS	DATE(S) OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION(S)	CHECK ✓ IF LOAN	CHECK ✓ IF IN KIND
INCLINE VILLAGE BOARD OF REALTOR 924 INCLINE WAY	3/8/00	750.00		

SYD BROSTEN  
Candidate's Name (print)TRUSTEE IGD INCLINE VILLAGE  
Office

District (if applicable)

## Contributions of \$100 or Less

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION
5/15	100.00
8/20	100.00
8/24	100.00

DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION

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*Candidate's Name (print)**Office**District (if applicable)***Expenses Categories**

CATEGORIES	CODE	TOTALS
Office expenses	A	
Expenses related to volunteers	B	
Expenses related to travel	C	
Expenses related to advertising	D	699.30
Expenses related to paid staff	E	
Expenses related to consultants	F	
Expenses related to polling	G	
Expenses related to special events	H	
Goods and services provided in kind for which money would otherwise have been paid	I	
Other miscellaneous expenses	J	

SYD BROSTEN TRUSTEE 1V61D  
 Candidate's Name (print) Office District (if applicable)

## Expenses in Excess of \$100

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE(S) OF EACH EXPENSE	AMOUNT(S) OF EACH EXPENSE
RAINBOW PRINTING 907 TAHOE BLVD. INCLING VILLAGE NV 89411	D	6/10/00	103.00
COSTCO RENO, NV.	D	6/16/00	482.61
ADVERTISING SPECIALTY P.O. BOX 10487 RENO, NV 89510	D	7/21/00	113.69

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